

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB Nur	OMB Number: 3235-0076								
Expires:	Expires:								
Estimated average burden									
hours per	hours per response 16.00								
OFO HOE ONLY									
Prefix	SEC USE ONLY Prefix Serial								
Presix	1	Serial							
DA	DATE RECEIVED								
	1								

Name of Offering (check if this is an amendment and name has changed, and indicate change.)				
Memphis Oaks 3 PDC Filing Under (Check box(es) that apply):	ULOE			
Type of Filing: New Filing Amendment				
		IN 1181 1001 1181 1181 1181 1181		
A. BASIC IDENTIFICATION DATA				
1. Enter the information requested about the issuer		OU TANK TOOL TANK TOOL TANK TANK TANK TANK		
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	0	7069796		
Memphis Oaks 3 PDC, LLC				
Address of Executive Offices (Number and Street, City, State, Zip Code)		(Including Area Code)		
8775 Folsom Boulevard, Suite 200, Sacramento, CA 95826	(916) 381-1561	<u> </u>		
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number	e Number (Including Area Code)		
6055 Primacy Avenue, Suite 140, Memphis, TN 38119	(901) 682-4400			
Brief Description of Business	5	PROCESSED		
Purchase, finance, development, operation, management and sale of commercial/industrial	real estate	I POOLOGED		
The of Durings Oppositation		JUL 0 5 2007		
Type of Business Organization corporation	lease specify):	JUL 0 3 2007		
business trust limited partnership, to be formed limited liabili	y company	THOMSON		
Month Year		FINANCIAL		
Actual or Estimated Date of Incorporation or Organization: 014 015 Actual Estim				
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)				
GENERAL INSTRUCTIONS	(1)44			
Federal:	ļ			
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D (77d(6).	r Section 4(6), 17 CFR 2	230.501 et seq. or 15 U.S.C.		
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering	A notice is deemed fil	ed with the U.S. Securities		
and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given b which it is due, on the date it was mailed by United States registered or certified mail to that address.	elow or, if received at th	at address after the date on		
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.			
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.		ot manually signed must be		
Information Required: A new filing must contain all information requested. Amendments need only repothereto, the information requested in Part C, and any material changes from the information previously supplied with the SEC.	t the name of the issue ied in Parts A and B. Pa	r and offering, any changes art E and the Appendix need		
Filing Fee: There is no federal filing fee.				
State:	_			
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed.	ecurities Administrator the exemption, a fee	r in each state where sales in the proper amount shall		
ATTENTION				
Failure to file notice in the appropriate states will not result in a loss of the federal exampropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	emption. Converse ss such exemption	ety, failure to file the is predictated on the		

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years;	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a cl	ass of equity securities of the issuer.
 Each executive officer and director of corporate issuers and of corporate general and managing partners of part 	nership issuers; and
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply Promoter Beneficial Owner Executive Officer Director	General and/or
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	Managing Partner
E DNI - (Local de la facilitation)	
Full Name (Last name first, if individual) Thurman, W. Gregory	
Business or Residence Address (Number and Street, City, State, Zip Code)	<u></u>
3500 Lenox Road NE, Suite 501, Atlanta, GA 30326	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Business of Residence Address (Number and Street, City, State, 21) Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or
Circle Dox(cs) that Appriy.	Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or
Cincon Institution Control Con	Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or
	Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	<u> </u>
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Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

					B. IN	FORMATI	ON ABOUT	OFFERIN	(G				
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?									Yes []	No X			
2.									•••••	Yes	No		
3.			ermit joint										X
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or ind commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated person broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)									urities in th EC and/or	ie offering with a state	· :	
Ful	l Name (I	_ast name f	irst, if indi	vidual)									
Bu	siness or l	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
Na	me of Ass	ociated Bro	oker or Dea	ıler					<u></u>				
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers					<u>.</u> .	
	(Check	"All States	" or check	individual	States)						 	□ ∧1	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Fu	II Name (I	Last name i	first, if indi	vidual)						· •			
Bu	siness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)				 	-	
Na	me of Ass	sociated Br	oker or Dea	aler	·-						<u>'</u>		
Sta			Listed Has										
	(Check	"All States	" or check	individual	States)	••••••				····	.l	□ AI	I States
	AL IL MT	IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Fu	II Name (Last name	first, if indi	ividual)									•
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	ime of Ass	sociated Br	oker or De	aler		·		<u> </u>					
Sta	ates in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				 		
	(Check	"All States	" or check	individual	States)						All States		
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Sold Offering Price Type of Security Equity\$_ Common Preferred Other (Specify membership interest s 0.00 0.00 \$ 0.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases \$ 0.00 \$ 0.00 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Dollar Amount Type of Security Sold Type of Offering § 0.00 Rule 505 \$ 0.00 Regulation A \$ 0.00 Rule 504 \$ 0.00 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees § 0.00 Printing and Engraving Costs.... 0.00 Legal Fees.....

Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately)......

Total

Other Expenses (identify)

\$ 0.00

\$ 0.00

\$

0.00

0.00

0.00

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES AND USE OF	F PR	odı	EEDS	
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	SS			s	
5.	each of the purposes shown. If the amount fo	s proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate at all of the payments listed must equal the adjusted group Part C — Question 4.b above.	nd			
				Dir	yments to Officers, rectors, & Ifiliates	Payments to Others
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				ì	_ .	
	Purchase, rental or leasing and installation of		∟			
	and equipment		[S_		. 🗆 \$
	Construction or leasing of plant buildings and	facilities	🗀	\$_		. 🗆 \$
	Acquisition of other businesses (including the offering that may be used in exchange for the	value of securities involved in this assets or securities of another	_	21		∏\$
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	• •					
	Other (specify): 100% of capital to be provided	ded by Members, as needed		• \$		
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		D. FEDERAL SIGNATURE				
sig	nature constitutes an undertaking by the issuer to	y the undersigned duly authorized person. If this no of furnish to the U.S. Securities and Exchange Comi- accredited investor pursuant to paragraph (b)(2)	miss	ion,	upon writte	ale 505, the following en request of its staff
İssi	er (Print or Type)	Signature	đ	ate		
Ме	emphis Oaks 3 PDC, LLC	natasha Zahaw	1		6/26/	2007
Nai	ne of Signer (Print or Type)				<u> </u>	
		Title of Signer (Print or Type)				